



FOR OFFICE USE

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Date received: \_\_\_\_\_  
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Reviewed by: \_\_\_\_\_

GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES

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DEPARTMENT OF PLANNING AND NATURAL RESOURCES

DIVISION OF BUILDING PERMITS

45 MARS HILL, Frederiksted, St. Croix, VI 00840

Cyril E. King Airport, Charlotte Amalie, VI 00801

PHONE: STX: (340) 773-1082, FAX: (340) 773-9310 / STT: (340) 774-3320, FAX (340) 714-9549

Earth Change Permit Application Form II-Single Lot

*Note to all applicants: A thirty day period shall apply to the review of an earth change plan by DPNR. The 30-day period shall begin with the date of reception indicated above. However, termination of the 30-day period shall not give inferred or automatic approval to the application (12 VI Rules and Regs. §532-12).*

**SECTION A: PROJECT INFORMATION**

Owner(s) Name as listed on Deed: \_\_\_\_\_

Submit Proof of Legal Interest: **(Copy of Deed/Lease with Covenants & Restrictions or Purchase Agreement/Land Contract)**

Physical Address: \_\_\_\_\_

Mailing address of owner: \_\_\_\_\_

Telephone #: \_\_\_\_\_ (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell)

Plot No: \_\_\_\_\_

Estate: \_\_\_\_\_

Acreage: \_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

Submit a copy of property tax bill or tax clearance letter (contact Tax Assessor's Office: 773-6459 (C'Sted), 772-3115 (F'Sted), 776-8505 (STT/STJ) for information.)

Zoning: \_\_\_\_\_

Name and telephone number of project designer, architect, engineer, or draftsman, (Site plan **must be stamped** by a certified licensed architect, draftsman or engineer.

Name & Phone \_\_\_\_\_ License Number: \_\_\_\_\_

Name and telephone number of certified earthwork contractor.

\_\_\_\_\_

Proposed action(s) – check those that apply:

- ☐ New Construction                      ☐ Addition (What is being added & what exists)

Briefly describe the total scope, including the end result of the proposed development(s):

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**\*NOTE\*** Lots greater than 1 (one) acre requires a stormwater permit, please contact the Dept. of Planning & Natural Resources (DPNR) at (340) 773-1082 (STX), 774-3320 (STT/STJ) or visit [www.dpnr-dep.org](http://www.dpnr-dep.org)

## **SECTION B: REQUIRED SUBMITTALS**

Submit the following for evaluation:

### **■ Site Plan**

- 1) The plan view detail at a scale no smaller than 1"= 50' showing road and lot layout, position of structures (existing and proposed), storm drainage, proposed soil erosion and sediment control measures, proposed water conservation measures.
- 2) A maximum contour interval of 5 feet, both existing and proposed, reflecting the proposed earth change. (10-foot contours will be permitted in the case of relatively steep topography, i.e. 25% + slopes.)
- 3) Show all easements on the site and within 50 feet of the property line.
- 4) Septic system/wastewater treatment:
  - a. setback distances from property lines, water supply, water bodies, and all structures (proposed or existing)
  - b. septic capacity requirements
  - c. septic details with cross section
  - d. disposal site(s) and area of final effluent

The following maps can be obtained from the Office of Lieutenant Governor (**2 copies each**):

- Official Zoning Map
- Sediment Reduction Map
- Water Resources Map
- USDA Soil Survey Map (please use the new soil survey map available at [www.pr.nrcs.usda.gov/technical/Soil\\_Survey/](http://www.pr.nrcs.usda.gov/technical/Soil_Survey/))
- PNR/PWD/OLG Drawing: Recorded Parcel Map and/or Registered Survey Map (Registered with the Cadastral Section and **STAMPED CERTIFIED** by the Cadastral Public Surveyor).
- FEMA Flood Insurance Rate Map
- Sketch and identify areas to be cleared and proposed Best Management Practices (BMPs) to be installed.

### SECTION C: Zoning Requirements Table

The following shall be completed by the applicant with entries as appropriate for the zoning district in which the activity is taking place. Not all the requirements will necessarily apply to a particular zone. Consult the Zoning Law.

<b>PARCEL INFO</b>	
Plot number & Estate:	
Zoning district	
Required building setback distance (ft)	
Soil type	
Slope (%)	
Flood zone	
Plot size (acre)	
Plot size (sq. Ft.)	
Total excavated material (cubic yard)	

<b>LOT DENSITY</b>	
First floor area (sq. Ft.)	
Second floor area (sq. Ft.)	
Third floor area (sq. Ft.)	
Living area (sq. Ft.)/lot area (sq. Ft.) = density (%)	

<b>OCCUPANCY</b>	
OVERALL BUILDING DIMENSIONS (L (ft.) X W (ft.))	
No. Of floors	
No. Of dwelling unit(or family)	
No. of Bedroom:	
No. of Bathroom:	
No. of Kitchen	
Maximum ceiling height (ft.)	
Maximum building height (ft.)	
Type of Roof	
Type of wall	
Parking: Number & construction type	
Driveway: Length and construction type	

<b>CISTERN</b>			
Roof Area (sq. ft.)			
Cistern Capacity (gallon)	<b>CISTERN (REQUIRED)</b>		<b>CISTERN (ACTUAL)</b>
Cistern dimension: length (ft.) x width (ft.) x depth (ft.)			

SEPTIC SYSTEM	SEPTIC SYSTEM (REQUIRED)	SEPTIC SYSTEM (ACTUAL)
Septic Tank Capacity (gallon):		
Drainfield Seepage Area (sq. ft.):		
Number of infiltrator chambers:		
DISTANCE IN FEET BETWEEN	TREATMENT TANK	ABSORPTION AREA
Upslope property line		
Sideslope property line		
Downslope property line		
Cistern		
Potable water line		

**SECTION D: Signature Block**

Application is hereby made for a permit to authorize the activities described herein. I agree to provide any additional information/data that may be necessary to provide reasonable assurance or evidence to show that the proposed project will comply with the applicable territorial water quality standards or other building permits standards both during construction and after the project is completed. I also agree to provide entry to the project site for the inspectors from building permits in order to make inspections regarding this application. To the best of my knowledge and belief, that such information provided herein is true, complete and accurate, I further certify that I possess the authority to undertake the proposed activities.

Signature of Owner(s) Signatures of all individuals listed on deed is required:

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_